

Amherst Health Department  
Environmental Health Services  
Bangs Community Center  
70 Boltwood Walk  
Amherst, MA 01002

Phone (413) 259-3077

Fax (413) 259-2404

**FARMERS' MARKET APPLICATION**

**PLEASE PRINT**

Date \_\_\_\_\_

Name \_\_\_\_\_

Name of Farm \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Items for sale throughout the full season \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_\_

Social Security Number or Federal Identification Number

Please fill out this form in its entirety along with the Workers' Compensation Affidavit. If you are selling **processed food** anytime during the market season please submit a payment of \$50.00 payable to the Town of Amherst, which is the fee to obtain a seasonal Health Department Permit. Applicants selling processed foods must have a valid Food Safety Certification and Kitchen Facility License (forward copies with your application). Please note that this application and payment must be made by **April 9, 2010** for the beginning of the Farmers' Season. No Permits will be issued until all documentations and fees are provided. Thank you.